

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

**AMENDMENT AFTER FINAL REJECTION  
EXPEDITED HANDLING PROCEDURES**

In re Patent Application of: Atty. Dkt.: LSN-4786-8  
Ivan BOULE, *et al.* T.C./A.U.: 2189  
Serial No.: 10/589,239 Examiner: Nathan Sadler  
Filed: January 3, 2007 Date: June 21, 2010  
Title: COMPUTER MEMORY ALLOCATION USING LOOKUP TABLES RESPECTIVELY  
ASSOCIATED WITH DIFFERENT LEVELS OF MEMORY SEGMENT SIZE

**MAIL STOP AF**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**RESPONSE/AMENDMENT/LETTER**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.**

**Fees are attached as calculated below:**

Total effective claims after amendment 44 minus highest number  
previously paid for 47 (at least 20) = 0 x \$52.00 \$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment 2 minus highest number  
previously paid for 3 (at least 3) = 0 x \$220.00 \$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add  
\$390.00 (1203)/\$195.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this  
paper and attachment(s)

One Month Extension \$130.00 (1251)/\$65.00 (2251)  
Two Month Extensions \$490.00 (1252)/\$245.00 (2252)  
Three Month Extensions \$1110.00 (1253)/\$555.00 (2253)  
Four Month Extensions \$1730.00 (1254)/\$865.00 (2254)  
Five Month Extensions \$2350.00 (1255)/\$1175.00 (2255) \$ 490.00

Terminal disclaimer enclosed, add \$140.00 (1814)/\$70.00 (2814) \$

☐ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) \$

Assignment Recording Fee \$40.00 (8021) \$

Other: \$

**TOTAL FEE \$ 490.00**

☒ **CREDIT CARD PAYMENT FORM ATTACHED.**

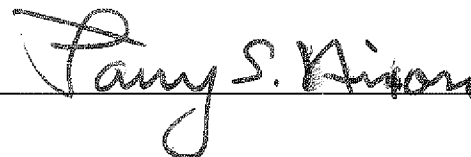
The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our **Deposit Account No. 14-1140**.

901 North Glebe Road, 11th Floor  
Arlington, Virginia 22203-1808  
Telephone: (703) 816-4000  
Facsimile: (703) 816-4100  
LSN:lef

**NIXON & VANDERHYE P.C.**

By Atty.: Larry S. Nixon, Reg. No. 25,640

Signature: \_\_\_\_\_



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